

I
WAKE
UP
BLACK

THE STATE OF BLACK WOMXN IN TEXAS



THE
AFIYA
CENTER

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FROM THE DESK OF MARSHA JONES, EXECUTIVE DIRECTOR OF THE AFIYA CENTER

The Afya Center is the manifestation of what the movement for human rights should and could be. In 2022, The Afya Center remains the only Black womxn-led, Black womxn-centered, Black womxn inclusive reproductive justice organization in the state of Texas. In this hyper-red state where the systems and citizens are obsessed with fighting for gun control and oil, Black womxn are exposed to an overwhelming level of oppression and disrespect- charged as enemies of the Texas state legislature, education agency and theological community at large for wanting agency over our own bodies and economic trajectories. In order to bring more awareness within our Texas community and the general diaspora, we, The Afya Center have chosen to share this report on the state of Black Womxn in Texas. Our intention is to elevate the stories, needs, concerns, and expectations of the non-monolithic Black womxn who exist at the intersections of the racist and classist systems that continue to be upheld in a country that we are required to sacrifice our lives, livelihood, and future generations to further develop and sustain.

Folks will tell you that Black womxn are doing well these days. Citing high rates of college degree attainment, the surge in entrepreneurship and a bi-racial Vice President from Howard, the “girl boss” movement is all about acknowledging the glass ceilings being busted up daily. However the fact of the matter is that Black womxn are being psychologically and physically weathered, exposed to preventable death daily at the hands of the medical, educational, employment and judicial systems daily.

Our battles in the legislative space surround the most basic of human rights: accessible mental health resources, affordable full spectrum health care, comprehensive sex education, pay equity, and the right to vote and live in safe, affordable neighborhoods- basic human rights for white folks. It has never been lost on me that these foundational rights are considered revolutionary because we expect them for Black womxn, and it is for that very reason that even in the face of government sanctioned attacks on our bodies we continue to show up for the womxn who need us- and even those who may not feel like they do.

Our work does not begin or end in state capitol offices, board rooms with donors, or even the sparse and highly underfunded clinics that remain in our state. Our work is so much more than just work. It is literally us waking up every day deciding to live free and making sure other Black women and girls have the opportunity to do the same, if they so choose. The fact that our choice to live free is seen as the anti-thesis of the American Dream is a conversation that folks need to examine within themselves. Hopefully this report will be the launching pad for that, and if not... well, water will continue to be wet.

Understand, The Afya Center is not some fleeting do-good, politicking, or fraudulent reform organization. Our presence in Texas is our love letter to Black womxn, and our love for Black womxn is unyielding, uncompromising, and unabashed.

My ask is that as you read this report, you take in the reality of what’s happening. Don’t minimize or excuse it because it doesn’t feel like the story of a Black womxn from your block or local community. Commit yourself to the idea that all Black womxn deserve the right to live,. Make the choice to fight for us, protect us, and value us outside of your personal agenda and without resistance. It’s time for folk to get serious about the state of Black womxn in Texas, because if not-- we may very well cease to exist.



REPRODUCTIVE JUSTICE AND THE AFIYA CENTER'S MOVEMENT FOR BLACK WOMXN.

In June of 1994, the Womxn of African Descent for Reproductive Justice developed the term “reproductive justice” in response to a lack of consideration and of the needs for altruistic justice including the liberation and protection of Black womxn, transwomxn and womxn from marginalized communities. Reproductive Justice is the human right to maintain personal body autonomy, to have children, or not to have children and parent the children we have in safe and sustainable communities. Many human rights leaders and activists have viewed *Roe v. Wade* as the cornerstone of the fight for womxn’s rights, however as time and experience has shown us, a constitutional right to have an abortion is not enough to protect the reproductive health and bodily autonomy of all womxn. When it comes to those who identify within groups that have been historically marginalized on the basis of race, sexual preferences, and proximity to wealth, there is still much more to be done to assure them a right to parent or not to parent in safe and sustainable communities.

This movement exists to uplift and prioritize the stories and needs of womxn who have been left unprotected by the systems and people that established a hierarchy of human value based on anti-Black capitalism and chattel slavery. The goal of Reproductive Justice is to abolish policies and laws that prevent marginalized womxn from living full, abundant lives simply because they are born or identify as womxn. The historic and present-day reproductive oppression of Black womxn is the result of intersectional layers of systemic oppression working strategically to prohibit them from accessing critical, lifesaving resources. It is, by definition, a human rights violation. Gender and race wage gaps, underemployment, underinsurance, gentrification, gerrymandering, redlining, police brutality, medical malpractice, institutional violence, intimate partner violence, high-cost medical supplies and food, and technology deserts are all examples of structural and environmental racism. This racism meticulously constructs a path to the denial of: adequate health care, the denial of financial security, the denial of safe housing, and ultimately the denial of liberty and life.”

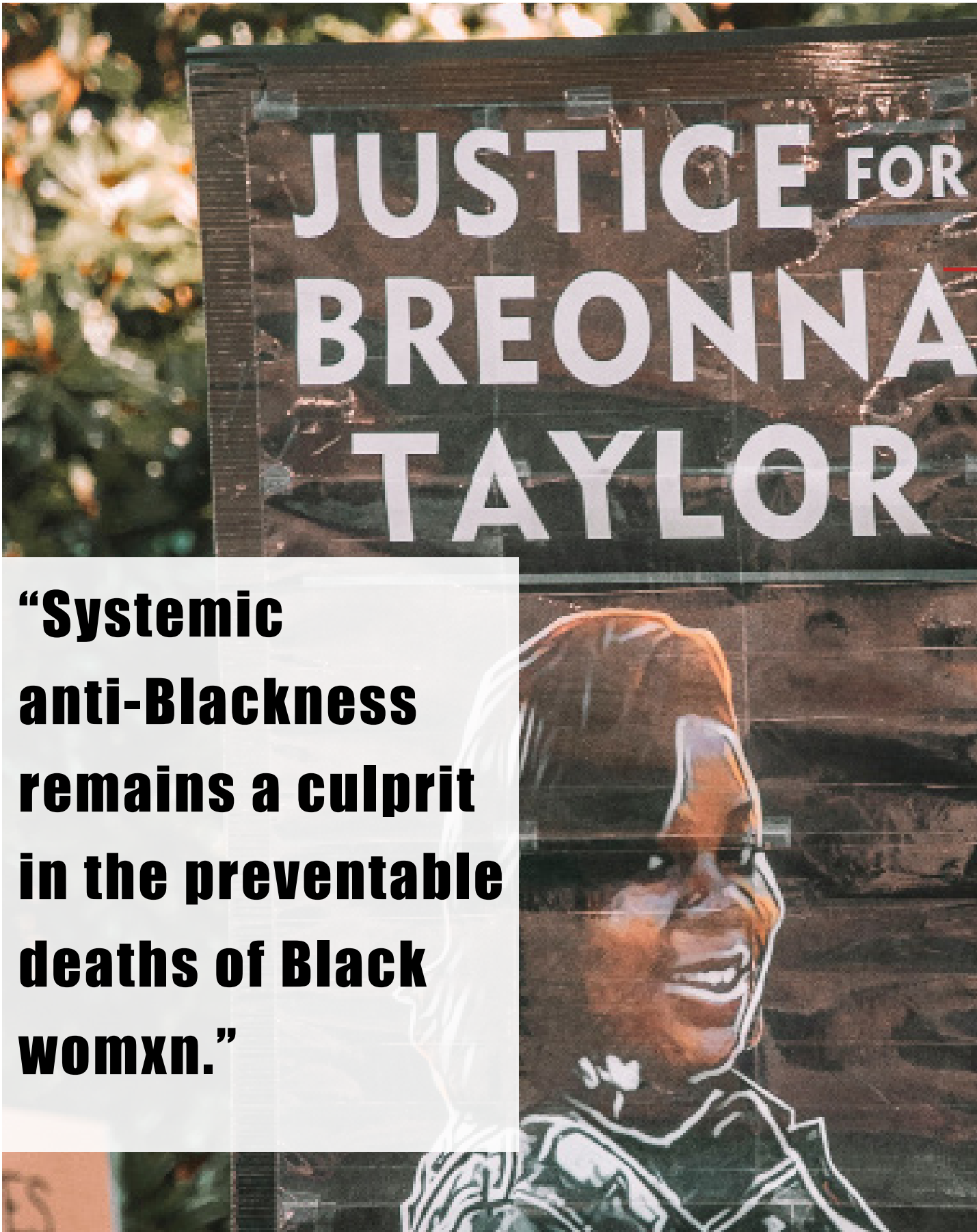
In response to this ever-present catastrophe, The Afiya Center has developed a plan of action that incorporates the stories, needs, desires and lived experiences of Black womxn, transwomxn, and marginalized womxn, in order to harness collective social and communal power and drive a shift in the social, educational, and political arenas. We lean on our community of activists, educators, writers, and organizers to create resources that counter the damning and damaging rhetoric forced into the hands of our children and teach them how to value their values, embrace their heritage, boast their authenticity, and ultimately make healthy decisions about their own bodies, their own sexuality, and their own communities.

The reproductive justice movement exists because of anti-Blackness, and the exclusion of womxn who do not identify as white, wealthy, heterosexual, and protestant. As a result, our approach to this work is inherently and intentionally pro-Black, pro LGBTQIA, and pro every other expression of womxn. We believe it is time that advocates and supporters of the historical womxn’s rights movement evaluate and assess their commitment to the health and safety of womxn and encourage them to begin by listening to and supporting the needs of Black womxn, who continue to die at alarming rates from reproductive oppression. Reproductive Justice is about life, and Black womxn deserve to live it, abundantly.

A note on language

Throughout this report you may encounter words or phrases not traditionally included in professionally published content. Our decision to use this inclusive and culturally relevant tone is aligned with our mission to remain authentic in all we do. For your convenience, we would like to provide the following definitions:

- **Folk (noun)** - humxn beings in general or considered collectively.
- **Womxn (noun)** - descriptive of individual who identifies as the feminine gender, cis or trans

A protest sign for Breonna Taylor. The sign is dark with white text that reads "JUSTICE FOR BREONNA TAYLOR". Below the text is a portrait of Breonna Taylor, a young Black woman with a headscarf, smiling. The sign is outdoors, with green foliage visible in the background.

JUSTICE FOR BREONNA TAYLOR

“Systemic anti-Blackness remains a culprit in the preventable deaths of Black womxn.”

50

Black womxn have been killed

by police since February 2015, and none of the officers who killed them have been penalized or arrested.

24%

of Black Womxn in America

experience some form of poverty at a rate over 2x times that of white womxn, and 1.5 times that of Black men.

44

per 100,000 live births

by Black womxn in America result in premature death of mothers, 3 times the rate of non-Black womxn.

RACISM IS KILLING BLACK WOMXN

This cannot continue to happen. Black womxn can not continue to die.

Systemic anti-Blackness remains a culprit in the preventable deaths of Black womxn. Due to historic and prevalent medical neglect, Black womxn's choices regarding motherhood and sexuality, as well as their engagement in the education and criminal justice systems, all too often lead to fatal outcomes that could have otherwise been prevented. The Afiya Center's mission is to transform the lives, health, and overall well being of Black womxn and girls by providing refuge, education, and resources. We act to ignite the communal voices of Black womxn resulting in our full achievement of reproductive freedom. In short, The Afiya Center exists to save the lives of Black womxn and girls.

At a time when monumental legislation has regulated abortions to be nearly impossible to receive in Texas and womxn remain unable to access life preserving medical coverage, we, The Afiya Center, submit this biennial State of Black womxn in Texas report for public review. We submit this report as a response to the loss of Black lives, and as a guide for communities, families, state representatives, non-profit organizations, and community coalitions on how to participate in the saving of Black life. Particularly the life of Black womxn. Our intended purpose is to provide a clear and concise correlation between racism, historical marginalization, and systemic violence perpetrated against Black womxn and the effects these factors have on their lives and livelihood. The data and recommendations presented specifically highlight the crux of biased, poor-quality healthcare, severe mass underemployment, overcriminalization, discriminatory policing and the weathering of Black womxn caused by non-inclusive policies and zero accountability measures from the State.

At the time of drafting this report, the COVID-19 pandemic has exacerbated the effects of the multiple systems of oppression that Black womxn are disproportionately exposed to. All these issues contribute directly to the degradation of the mental, physical, and financial health of Black womxn and ultimately their deaths.

This cannot continue. Black womxn cannot continue to die.

This State of Black womxn in Texas report is divided into four sections. They are as follows:

- **Part One:** The Impact of Racism and Classism in the Healthcare System
- **Part Two:** The Violence Perpetuated in the Education and Criminal Justice System
- **Part Three:** Intersectionality and the Black Superwomxn Burden
- **Part Four:** A Blueprint for Life: Advice on Support of Black Womxn

At the culmination of this report, you will be able to see how Black womxn and girls are being harmed in every existing system in Texas and continue to die prematurely at alarming rates. We encourage you to share this information with your neighbors, families, your communities, and to make the revolutionary choice to protect Black womxn by joining the movement for reproductive justice.

REPORT STRUCTURE AND CONTENT

WHAT WE KNOW KNOW: KEY FINDINGS

In this section of the report, we will explore six factors that are directly contributing to the highest number of preventable deaths, violations of human and civil rights, and traumas amongst Black women in Texas. These selective factors are not an exhaustive list; however, we believe that as we address and rectify them, we will see more Black women live and thrive. The factors are as follows:

- Maternal Mortality
- Reproductive Autonomy
- HIV/AIDS Safety and Prevention
- Criminalization of Black Girls
- Over Sentencing and Cash Bail
- Intimate Partner Violence
- Intersectionality and the Black Superwoman Burden

HOW WE MOVE FORWARD: ADVICE AND EXPECTATIONS

Since its inception in 2008, The Afya Center has been consistent and unapologetic in our quest to advocate for Black women in Texas. We petition state representatives and local politicians to listen to Black women, believe Black women, and fight for Black women. This section of our report encompasses the voices of all the Black women we serve. The specific areas of action we recommend are with regard to:

- Political Access
- Health and Human Services
- Community Enrichment

ABOUT THE AFIYA CENTER AND BLACK WOMXN

It is important that we continue to reiterate that Black womxn are centered in every aspect of the existence of The Afiya Center. We are Black womxn, bred and nurtured to life by Black womxn, and as a dynamic and impactful constituent base, we continue to implore you to listen to Black womxn when we say we need change. The issues we present in this document are imperative, time sensitive and require your utmost attention and action as they are some of the biggest threats to Black womxn's collective reproductive freedom.

The space we, The Afiya Center, have dedicated our resources to is one of advocating for those of us who are continually thrust upon the chopping block legislatively and disrespected under the guise of respectability politics, the war on poverty and adherence to oppressively zealous and misogynistic religious views.

To those who are in positions of political power, we request your attention regarding the lives of Black womxn and girls. We submit this report and raise our voices to remind you of the privileged opportunity you have in your position to represent the people and expect you to speak to the issues we have outlined. We ask that as you enter into debates, you carry with you the voices of Black womxn and girls.

Carry with you our prayers and memories of those who have been lost and forgotten due to inaction. Think of all of us whose lives hang in the balance of bills that cross your desk and consider us consistently in the propensity for which you vote. Black womxn matter, today and every day. Remember that, always.

43%

of Texas Black womxn say over policing impacted their family planning decisions

52%

of married Black womxn in Texas are the breadwinners of households with at least one child.

4.8

days each month, Black womxn in Texas suffer from "not good" mental health.

\$1 MIL+

is the average lifetime wage losses for Black womxn in Texas due to the race and gender wage gaps.



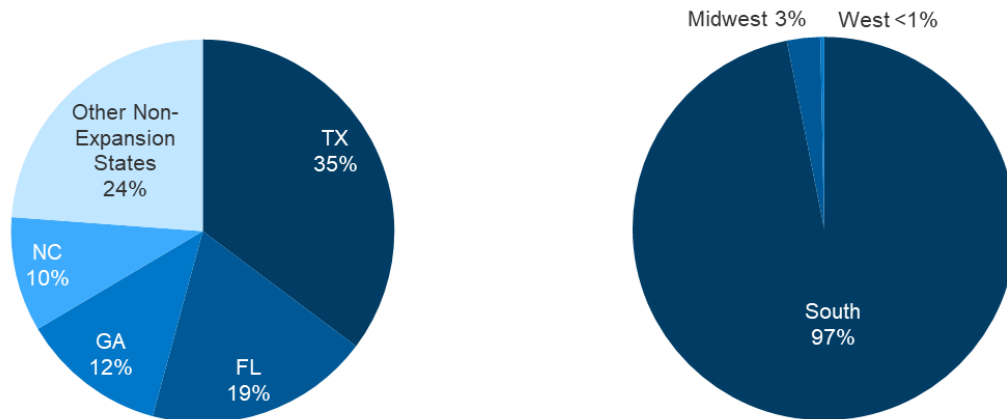
WHAT WE KNOW:

WITHOUT EQUITABLE ACCESS TO ANTI-RACIST AND COMPREHENSIVE HEALTHCARE, BLACK WOMXN WILL CONTINUE TO DIE FROM PREVENTABLE FACTORS.

Comprehensive Medicaid expansion, accessible and affordable healthcare resources, mandatory practitioner bias training and punitive accountability are critical to keeping Black Womxn safe and alive.

Racism, Classism and the Texas Healthcare System

Distribution of Adults in the Coverage Gap, by State and Region, 2019



Total = 2.2 Million in the Coverage Gap

NOTE: There are no individuals in the coverage gap in the Northeast as all states in the Northeast expanded Medicaid.
SOURCE: KFF analysis based on 2020 Medicaid eligibility levels and 2019 American Community Survey, 1-Year Estimates.



Racism, classism, misogyny, and neglect thrive in the Texas healthcare system. The threat of insufficient care and lack of accountability regarding the lives and livelihood of Black womxn has created a crisis and we should all feel compelled to fight to ensure access to equitable, anti-racist, comprehensive and affordable healthcare for every single womxn in this state. That includes reproductive and sexual autonomy.

Black womxn mothers, daughters, sisters, cousins, and friends in Texas continue to bear the brunt of intersectional oppression in the healthcare system. The US National Library of Medicine - National Institutes of Health presents Black womxn as the most likely to experience discrimination, receive substandard medical care and undergo unnecessary surgeries such as hysterectomies as a result of practitioners that do not listen to their concerns. The data surrounding the irresponsible treatment of Black womxn is expansive, and Black womxn and girls residing in Texas continue to die for simply being Black.

As it stands, 26% of womxn ages 16-44 in Texas are uninsured, or underinsured, primarily due to inadequate minimum wage limits and the decision by the Texas Legislature to not expand Medicaid coverage to meet the needs of those who do not qualify for traditional Medicaid or cannot afford the Affordable Care Act's

marketplace premiums. Texans account for 35% of all people in the "Medicaid coverage gap", leaving folks who by definition have limited family incomes, live below the poverty level, and are likely working low wage service jobs- unable to access preventable and prescriptive healthcare.

As Black womxn across Texas and the United States face some of the highest gaps in wage earning and continue to be denied access to higher paying jobs, they amount to a considerable percentage of the 245,000 Texans within the "Medicaid coverage gap", and are left without lifesaving medical necessities such as pre and postnatal care or prescription and management support for HIV/AIDS, both of which are within the top 10 leading causes of death in Black womxn ages 15-54, respectively. This is unacceptable.

Black womxn exist within intersections that touch nearly every other demographic. The expansion of services to comprehensively serve Black womxn will inherently improve the healthcare experiences of others. We encourage community organizations and coalitions to shed light on the importance and impact of the Medicaid coverage gap, especially now, as the COVID-19 virus continues to claim the health and lives of so many Black folks, and at some of the highest numbers amongst ethnic groups in the United States.

We implore those who have voices to use them to bring attention to the premature deaths of Black womxn and the impact that their lost lives have on our communities and families. Black womxn deserve to be alive. Black womxn deserve to be healthy. They deserve to be both, simultaneously.

Maternal Mortality

Maternal mortality is defined by the Center for Disease Control (CDC) and the World Health Organization (WHO) as the death of a mother while pregnant and/or within 42 days after pregnancy due to a pregnancy-related cause. However, when a child bearer dies within a year after pregnancy it is also classified as a pregnancy-related death. These deaths, often caused by hemorrhage, infection, and cardiovascular related issues, have been increasing in the United States since 2000. Although 700 pregnancy-related deaths occur each year, two-thirds of these deaths are considered to be preventable.

Contrary to other identity groups, Black womxn are more likely to experience fatal complications during this time regardless of age, education level, socioeconomic status or even access to medical care. The prevalence of anti-Blackness in the healthcare system leaves them vulnerable to medical misdiagnosis, neglect, and preventable birthing crises.

Data from a 10-year study by the Centers for Disease Control (CDC) shows that Black womxn experienced pregnancy related deaths at a rate of three to four times

Percent of Mothers Beginning Prenatal Care in the First Trimester of Pregnancy, 2012 ^a	
All Women	83.6%
White	85.7%
Black	80.9%
Hispanic	82.6%
Native American	81.0%
Asian/Pacific Islander	83.9%
Multiracial	81.6%
All Other Races/Unknown	80.4%
Percent of Low Birth-Weight Babies (less than 5 lbs. 8 oz), 2013 ^b	
All Women	8.0%
White	7.0%
Hispanic	7.1%
Black	13.1%

Notes: Whites and Blacks are non-Hispanic, while other racial groups include Hispanics.

Source: ^a(2012); ^b(Martin et al. 2015a).

higher than other ethnic/racial groups, a reality that stems from a lack of medical professionals who utilize cultural competence, undergo bias assessments, or even listen to the needs and concerns of their Black womxn patients. The proceedings of the National Academy of Scientists published a report highlighting the impact of racism and bias present in medical students, residents, and doctors. Participants admitted that they believe Black patients have “physically thicker skin, feel less pain and have abnormal blood that coagulates more rapidly.” The report goes on to share that these beliefs directly inform how they develop treatment plans, and practitioners admitted to disregarding their Black- female patient’s comments about pain levels, denying them thorough testing, critical attention, and medication.

The term, “weathering” has been used to describe the additional impact of intersecting racism and sexism on Black womxn and proposes that the accumulation of racial stress over a Black womxn’s life contributes to the observed pattern of disparities in their maternal outcomes. The hypothesis goes on to explain that because upward socioeconomic mobility is associated with increased exposure to discrimination for womxn of color, as Black womxn advance in their degree attainment and careers they become more susceptible to the effects of racism, weathering their physical and psychological health. Although increased socioeconomic status serves as a protective factor against negative birth outcomes for non-Hispanic white mothers, disproportionate rates of preterm birth and low birth weight for non-Hispanic Black mothers have been found at every education and income level. Again, racism is literally killing Black womxn at every turn.

According to the Texas Maternal Mortality and Morbidity Review Committee and the Department of State Health Services, the majority of the deaths of womxn who had previously been insured through Medicaid increasingly happened between 43 and 365 days postpartum- when they no longer had access to coverage. In short, womxn who have been recently pregnant are not being covered by Medicaid long enough to ensure that they are healthy and healed.

Since the start of the global COVID-19 pandemic, 40% of womxn reported that they have changed their plans about when to have children and the number of children they plan to have. Additionally, 44% of womxn who made changes to their fertility and family planning preferences were Black and 37% of the womxn were low income. Black pregnant womxn reported greater likelihood of having their employment negatively impacted by COVID-19, shared more concerns about a lasting economic burden and are increasingly worried about their prenatal care,

birth experience, and postnatal needs. Even with access to this data, the 2021 Texas Legislature still only granted six months of coverage for mothers on Medicaid, with no guarantee for access to provider home visits or paid parental leave during the postpartum period.

Compared to every other wealthy nation, the United States spends a sizable percentage of its gross domestic product on healthcare, yet there have been no improvements regarding maternal mortality or morbidity. The implicit and explicit biases, lack of adequate access to culturally relevant care providers (i.e., doulas and midwives- whom have been noted to improve health outcomes for Black womxn), and extreme medical neglect have caused insurmountable, preventable deaths. Deaths which disrupt countless families and further destabilize vulnerable communities. Black mothers deserve better.

We, The Afiya Center, call on each and every Texan to: Elevate these discrepancies in care and to petition facilities, providers, insurance companies, and local politicians to increase maternal Medicaid coverage. Create anti-racist accountability measures that will require all practitioners to meet bias training and evaluation standards in order to continue practicing medicine in the state of Texas.

Make significant investments in the communities that remain vulnerable to environmental and social exploitation- both of which are contributing factors to maternal mortality and morbidity.

Mandate access to affordable childcare, mental health care, and breastfeeding support.

Provide funding for the establishment of safe, community founded and run facilities that can provide timely and relevant information on managing postnatal concerns such as gestational diabetes and pulmonary embolism.

We refuse to give up on Black mothers and won't rest until they are given the support and lifesaving care they deserve.

Sexual Safety

It is time Texans address the life threatening nature of its abstinence only, antiquated, marginalized approach to sexual education. The lack of access to safety development resources and prevalence of false information shared in classes and clinics across the state contribute largely to the harmful stigmas and unintended outcomes that young folks of color experience. By perpetrating moral zealous Texas has placed many Black womxn and girls, who's public education is regulated by limiting religious beliefs they may not share, in the line of fire, preventing them

from accessing comprehensive sexuality education and equitable access to prophylaxis; both of which have been proven to reduce exposure to HIV/AIDS and relevant factors that lead to premature death.

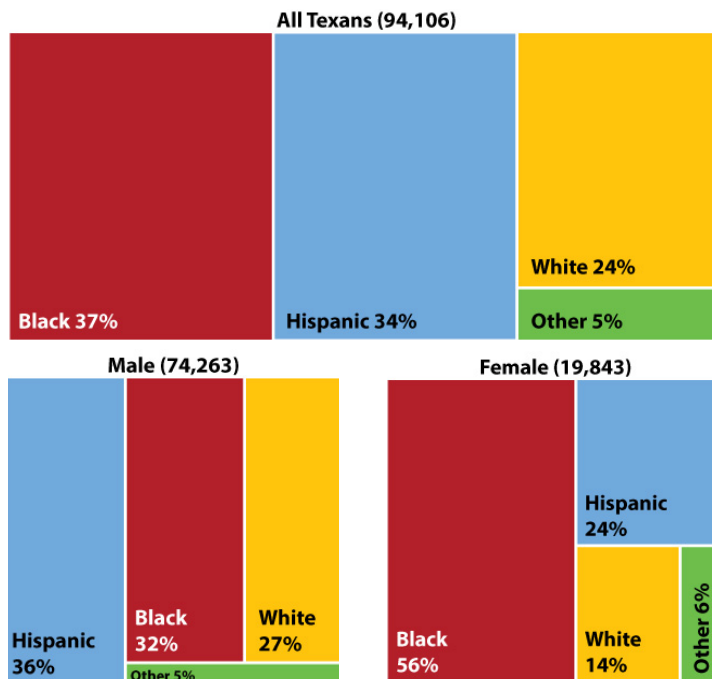
Along with inadequate sexual education, fallacies, stigmas, institutional racism and historical malpractice continue to be barriers of sexual safety for Black womxn. The Texas Department of Health and Human Services reports that of the 37% of Black Texans living with HIV in 2018, 56% are womxn. Maya Merriether of the Black AIDS institute notes that the “work of prevention care starts with providers addressing the historical memory Black womxn have in regards to medical mistrust, which includes misogynoir, a lack of inclusion and limited communication about accessing education about prevention, living with the diagnosis, or treatment of HIV.” The Journal of Association of Nurses in AIDS care also presents that Black womxn's mistrust of medical providers influenced by structural racism, classism and discrimination within the healthcare system is a high impact factor in the limited utilization of, or access to, testing, awareness, and care.

Dr. Schenita Randolph, Ph.D, M.P.H.,RN, an assistant professor at Duke University School of Nursing reports that the classism that exists within AIDS/HIV prevention and care, is double-sided for Black womxn. “We know that current clinical and research efforts tend to focus highly on low-income Black womxn who may not have high educational attainment and who may not have access to resources,” Randolph added. “[but]... studies have also shown that Black womxn of higher education levels and socioeconomic status are less likely to screen for HIV and STIs due to having a low perception of HIV risk. Health care providers who are making the decision to limit HIV testing, awareness and prevention information to only womxn from lower socioeconomic status, leave the entirety of Black womxn at great detriment since Black womxn have smaller sexual networks. This practitioner bias is a significant and unaddressed factor for the prevalence of HIV and STIs within Black communities in the U.S. With the proper medication, specific lifestyle changes and emotional support, this diagnosis is not the death sentence it once was. Unfortunately, the access to life saving information and medication in Texas is still limited and Black womxn who exist at intersections of race, class and sexuality are left to navigate the experience alone.

In situations where individuals do seek testing or treatment, many are fearful of the stigma or discrimination that comes with a positive HIV diagnosis. Although there are prophylaxis available that can significantly reduce the likelihood of contracting or spreading the AIDS virus, such as PREP, budget cuts to

“Not only do we see higher rates of HIV in the Southern United States, there are also laws and policies that place Black Americans at greater risk for worse outcomes of HIV. Many southern states haven’t expanded Medicaid under the affordable care act, and Medicaid expansion is associated with greater rates of HIV testing.”

- Gregorio Millett, VP and Director of Public Policy, amfAR



clinics in historically Black or low-income neighborhoods, fear and a general lack of relevant information have created a bottleneck to distribution of the medication to high-risk groups. With this in mind, The Afiya Center believe it is imperative that we push ourselves, our faith based community service organizations, churches, and all of Texas’ educational spaces to destigmatize sexuality, and become inclusive learning spaces for sexual safety. We must also recognize that there are a multitude of young people who are disconnected from traditional learning spaces, many of whom are foster children or come from backgrounds that could put them at risk for a multitude of physical and psychological health factors. They depend on community-based services for general and reproductive healthcare so it is imperative that we petition local, state and national decision makers to establish community hubs that provide inclusive and comprehensive sexual safety resources, including but not limited to HIV/AIDS prevention literacy, confidential testing and post diagnosis support. We must petition our elected officials to expand Medicaid coverage to include full spectrum HIV/AIDS prevention, detection, management and support for the most vulnerable in our society, not contingent on finances, but rather in consideration of human life. We must reimagine what sexuality safety can be for Black womxn and girls and right to see it become a reality in our lifetime.

Abortion and Reproductive Autonomy

When and how womxn choose to parent should not be a matter of life or imprisonment. Childbirth is not a

singular event. What may begin as a decision between two, transforms into a commitment to a full body experience that womxn must engage in individually. Even with a supportive partner and community village for Black womxn in Texas, the decision to parent or not to parent is compounded with the fears of maternal mortality, systemic oppression, police brutality, and institutionally violent spaces.

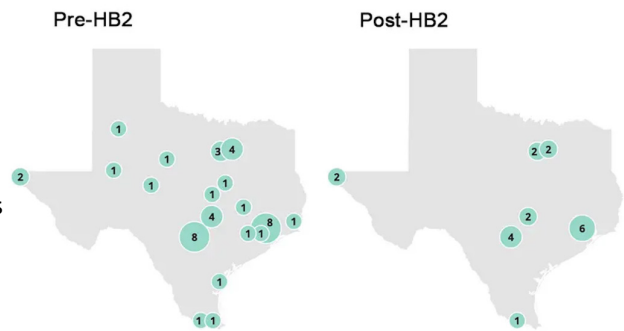
Black womxn in America often tread in unsafe waters at the authoritarian hand of injustice, forced to contort their bodies, hair, and voices in assimilation to the insidiously anti-Black expectations of Americanism. In Texas, that hand extends to their wombs- pillaging their lives and robbing them of the opportunity of choice in deciding to parent or not to parent in a world that has yet to acknowledge their humanness, much less their vision or aspirations of healthy children and communities. Lawmakers and those who uphold these egregious policies are aware of the impact historic and present oppressive marginalization has had on Black womxn’s physical health, economic positioning, and proximity to environmental toxicity. Even with this awareness, they continue to pass legislation that stifles Black womxn’s ability to choose to parent when, how, and only if they have the capacity and desire to so.

In September of 2021, Texas passed a heavily unconstitutional anti-abortion bill that criminalizes womxn and their medical providers for engaging in the abortion procedure at six 6 weeks gestation, the time when most womxn begin to become aware that they are pregnant. This bill not only criminalizes the procedure

regardless of health risks and cases of sexual assault and incest, but it also allows citizens to sue those who seek and perform abortions for \$10,000, violating HIPPA regulations and patient privacy. While the state has yet to address calls for police accountability, Medicaid expansion and a declaration against anti-Black hate crimes, the decision to develop and enact violent policies such as this further exacerbates the ever-growing distrust Black womxn have in the legal and medical systems.

In 2018, the ACA contraceptive coverage requirements were introduced, providing more womxn with the opportunity to choose to use more effective, long-term methods of birth control. Contraceptives such as birth control pills and IUDs currently make up an estimated 30-40% of out-of-pocket health care spending for womxn., but the high upfront costs of methods like IUDs and implants had been an impending factor for womxn who were interested in more effective, long-term options. With the introduction of a no cost-sharing coverage option, womxn began to choose more reliable methods of birth control, significantly decreasing the rate of unintended pregnancy and associated costs of childbirth. In more recent news, a spring 2020 study on fertility preferences during the COVID-19 pandemic showed that more than 40% of womxn reported that because of the pandemic, they had changed their mind about having children. Black womxn specifically noted that access to sexual and reproductive health services (38%), the lack of affordability for prescriptions (30%), the loss of a job (44%), and/or a reduction of ability to pay household monthly bills (46%), were top the contributing factors that led to this decision.

In the face of systemic oppression, state sanctioned violence against their bodies, and a global pandemic that disproportionately affect their communities, this data is a clear indication that when provided the opportunity to make a decision autonomously, Black womxn are choosing to delay pregnancies until they feel safe from economic and health related harm., and they are not alone in this choice. Yet we still find 43% of womxn are currently without proximal access to critical family planning services as 96% of Texas counties have zero clinics that provide abortions. In 2014 there were 44 facilities statewide that provided abortion services, 28 of which were accessible womxn's clinics. By 2017, there were only 21 clinics and 35 facilities that could provide abortions in the entire state. Additionally, in 2018, the Trump administration introduced legislation that presented further barriers to womxn seeking abortions while simultaneously broadening employers' ability to be exempt from the ACA contraceptive coverage requirements. These exemptions deny womxn coverage for both contraceptives and abortions, based on their



employers' or college/universities religious beliefs or loosely defined moral "obligations". None of these regulations address the economic ability or personal desire of a womxn to become pregnant and have a child. It states no requirement of the employer or university that deny this access to provide care or meet equitable childcare standards or provide compensation that would cover medical expenses incurred during and after childbirth.

Black womxn have always remained responsible for their own care and the care of their families and communities- even in the face of a hyper critical society. When Black womxn choose whether to parent, their factor of consideration should be respected as well as their decision. It should never be up to the state or random citizens to decide what is best for the bodies and lives of individuals it holds no responsibility for. With that in mind, The Afiya Center commits to continuing our work of providing full spectrum care to Black womxn- whether they choose to parent or not to parent and whether their choice is made at 6 weeks or further into their gestational cycle. We are here for Black womxn always, and in all ways.



A BOUNTY ON BLACK WOMXN

The abortion ban in Texas.

An Interview with Michelle Anderson, State Organizer of The Afiya Center

On September 1, 2021, Texas Legislature passed Senate Bill 8/House Bill 1515, granting “any person”, including even those who do not reside in Texas and those with no relation or connection to a patient, against a broad range of defendants which includes the individual seeking an abortion, the doctor performing an abortion, and those who aid and abet folks seeking abortions after 6 weeks gestation.. The following is an adapted conversation with Michelle Anderson, State Organizer for The Afiya Center, Dallas, TX.

Q: Michelle, how would you describe the relationship between Black womxn, abortion rights, full bodily autonomy, and what’s happening in the Texas Legislative Session?

A: Well, for starters, let’s be honest about the fact that bodily autonomy is something Black womxn in America have never had. It’s so interesting to me that you can turn on the TV or look on social media or even in the grocery stores and see folk walking around in shirts or with stickers that say stuff like “Protect Black Womxn” or “Trust Black Womxn” and that’s all well and good, but when you juxtapose that to the 536 bills that were proposed to the Texas Legislature during the 2021 session to restrict abortion and reproductive rights, it’s clear that folk don’t trust us to say that we don’t want children or that we know what’s in the best interests of our bodies or families.

Q: I definitely get that, as a Black womxn from Texas, I grew up feeling that vagina was a problem in one way or another.

A: Yes! That’s the reality for the majority of Black womxn and girls in Texas. That’s why our mission is to transform the relationship that Black womxn and girls have with their bodies. It’s important to highlight that this relationship has been interrupted since the time of chattel slavery and the extreme sexual assault that white slave owners and their wives forced the folks they captured to endure. Let’s not forget that modern gynecology was established through sadistic experimentation on the bodies of trafficked and enslaved Black womxn and girls at the hands of murderous doctors who dissected their wombs with no anesthesia or quality of care.

Q: I actually just learned that maybe a few years ago. Hundreds of hours in classes and I learned that at happy

hour with some Black womxn. When I told my mom what I learned later that week, she was surprised to learn it as well!

A: That is why places like The Afiya Center are so important! Our mission of healing and growing this relationship between Black womxn and girls and their bodies is revolutionary, intersectional, and intergenerational. Yea, we talk about choice but not just the choice to have a child or not. When we discuss being denied choice and reproductive justice, we are also talking about the systems that force young Black girls to go to schools named after confederate generals that teach anti-Blackness at every turn! Folks scream at Black girls about unintended pregnancies but never address the policies that leave our schools underfunded and full of culturally incompetent teachers who preach abstinence to young folks who are already sexually active. You can’t imagine how many womxn are left in the dark about how to even notice that they might be pregnant- not everyone misses periods or gains weight, which is why it’s so hard for womxn to know that they are pregnant at even four months, much less six weeks!

Q: Let’s talk about the verbiage used in developing the “heartbeat bill.” This is some intense language and basically authorizes folks to police the medical choices of womxn in Texas. How is this even possible?

A: This bill is basically a go-around to the Roe vs. Wade Supreme Court case that protects a womxn’s right to seek an abortion. By encouraging civilians to file \$10,000 lawsuits against womxn, their advocates, doctors, and families, the state of Texas can say that they aren’t violating the constitution, even though they are literally establishing a bounty on the uterus of womxn.

Q: I can’t say enough how terrible this bill is. I keep thinking it was less than eight months before this bill was voted on when the same folks who support this bill charged the Capitol in a violent and deadly insurrection! How is it that we are in the middle of watching court cases and praying that folks who killed unarmed Black folks are convicted, while simultaneously being put in the line of fire for our family planning choices

A: And that is exactly why we don’t just focus on

abortion rights. Reproductive justice is not a single-issue thing for Black folk, because we don't live single-issue lives. For us, being forced to care for children we don't want or can't afford leads to extreme hardships. Our communities are already underfunded and disrupted by developers and city planning offices that box us into small spaces by tearing down affordable housing options, limiting transportation options, creating food deserts, and allowing for the overpopulation of our air and environment. You can look at commercials and social media and see stories of Black womxn living this new life- starting businesses, graduating from schools, and owning their own shit, and that's a beautiful story- it might even make you think there's been real progress for Black womxn in this country. The unfortunate reality is that with every step, a few of us are able to take forward, there are hundreds of thousands who become the scapegoats of white supremacy. Poor Black womxn who can't make it out of the hood are demonized for being poor or illiterate, violated by bootstrap propaganda, and stripped of their most basic human rights. If we get real about why womxn choose abortion, it's things like this. Black womxn are constantly told how they should act, sound, do their hair, raise their kids, love their men, and worship their God, and that if they don't follow the rules others set about those things, that's why they fail or falter. That's bullshit. And it is not by happenstance that this is happening alongside the attack on voting rights. When Black womxn get to choose their path and direct their attention to the polls and legislative action, things change. We saw that in the general elections last year. The reality is that Texas politicians and their constituents don't want Black womxn to be able to make changes in our communities and state legislatures. By making abortions inaccessible, Black womxn that become pregnant while trying to build themselves up financially or educationally will have a really hard time trying to fight for the world and keep themselves and their babies safe when maternal mortality is still 3x higher for Black womxn and the price of housing is steadily rising while the minimum wage is still pennies on the damn dollar.

Q: Yes! All of that! That's the part that I'm always looking to hear someone talk about when I hear conversations about reproductive rights. There's a completely different story for Black womxn when we talk about why having access to abortion is so critical. How can we get the folks who are talking about women's rights on elevated platforms to elevate our story?

A: Honestly, the only way for that to happen is for us to keep having these conversations and keep pushing to the front. Marsha tells folks all the time.

“The Afiya Center's fight for abortion rights is much bigger than what white womxn preach in pink vagina hats”, and that's the truth. Fighting for reproductive justice will never begin or end with the motives of rich white womxn who don't experience the intersecting oppressions of poor, Black, queer womxn from the hood. That same principle applies to movements that fight for Black voices to be heard but limits what Black voices matter based on gender, sex, sexuality, wealth, education level, job choices, body composition, or whatever else. It doesn't matter if you have been knowing a womxn since she was 5 and go to church with her Daddy, if you feel like it's your place to vocalize your issues with a womxn who chooses abortions, birth control, or even to have 50-11 kids in her 70s, ask yourself why you feel like you should have dominion over another human's body? Learning to trust Black womxn is the first step to being able to protect us, so start by trusting that we know what we need and that the ability for us to access full-spectrum reproductive healthcare is not a ploy or plot against the Black family. Educate yourself on the history of systemic racism how it shows up in Black communities along with how it impacts Black womxn and girls and it'll help you gain insight into why we make decisions we do.

Before we end, I want to say to the Black womxn in our community, across Texas, and in every city, state, country, or province in this world: know that The Afiya Center is not going to ever stop doing what we do. We will never, ever shame Black womxn for their decision to choose to parent, not to parent, to birth in a hospital, or at home with a doula and midwife. If you ever call us, know that we will be here. Moments like this simply make us more committed to supporting you by any means necessary. Know that if you need anything- from abortion assistance to weekend child care, to a hot meal while your rest and recuperate in a safe place- we will be here for you.



WHAT WE KNOW:

**THE VIOLENT, ANTI-BLACK
SYSTEMS OF EDUCATION AND
CRIMINAL JUSTICE ARE KILLING
BLACK WOMXN.**

The violence perpetrated against Black womxn and girls in schools and the inhumane treatment they experience within the criminal justice system are critical factors that lead to disenfranchisement and premature death.

The Impact of Anti-Black Institutions of Education and Criminal Justice

The violence perpetrated against Black womxn and girls in state run institutions of education and criminal justice directly contribute to their socioemotional weathering, economic disenfranchisement, and premature death. Throughout this report, we continue to bring to light the specific ways Black womxn's intersectionality leaves them exceptionally underserved. Marginalized by their intersecting race, gender, and class identities, Black womxn remain unsafe in communities across the state of Texas as policies developed to serve those who are either Black, womxn, or poor, have yet to consider the impact felt by those who are all the above, simultaneously.

This lack of consideration has become a source of trauma for Black womxn as they remain unheard by health practitioners, educators, lawmakers, and folks who exist explicitly within their cultural or gender specific communities. Much like the Black Power movement of the 1960's and 1970's promoted many misogynistic ideals, the corresponding Women's Rights and present-day Girl Boss movements exclude the experiences of the Black womxn identity- while benefiting off the presence and work of the very group they eventually bury for self-elevation.

Even today as social media spaces elevate the voices of folks claiming to dismantle oppressive spaces that promote respectability politics to make way for authenticity and the preservation of culture and communities, Black girls are handled violently for their tone and hairstyles in community schools. While Black womxn are disenfranchised and left without safe or affordable housing options, gerrymandering and gentrification make way for high rise luxury apartment buildings and stores that promote healthy living at high costs. Black womxn and girls experience disproportionately higher rates of intimate partner violence, out of school suspension, the gender/race pay gap, and economic distress, hyper-exposing them to the anti-Black criminal justice system and its corresponding disruptive spaces while "girl boss" influencers promote

representation as the solution to every issue, turning a blind eye to the crippling intersectional realities of being Black and female.

Reproductive health is defined as the state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity, in matters relating to the reproductive system and to its functions and processes. The violence perpetrated against Black womxn and girls through the education, criminal justice and social services systems is a reproductive health issue and until it is addressed as such, Black womxn will continue to die.

Adultification and Criminalization of Black Girls in Schools

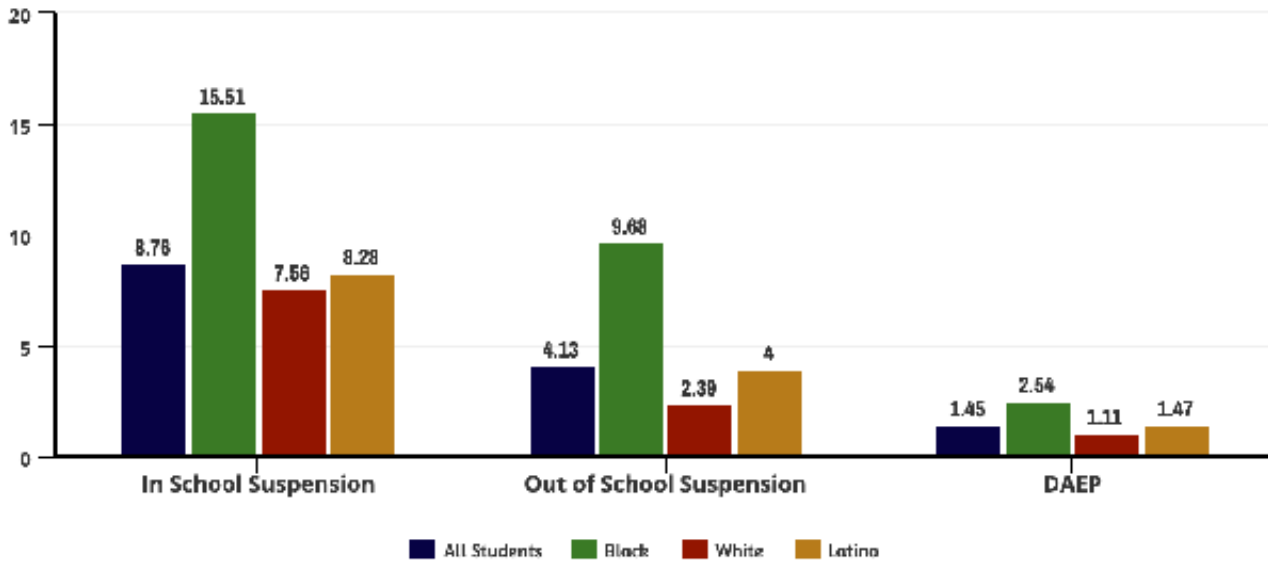
The adultification, criminalization, and over-policing of Black womxn's bodies begins at an early age and continues to become more invasive and structurally supported as they grow and navigate the K-12 system. The Georgetown Law Center on Poverty and Inequality provides—for the first time— data showing that adults view Black girls as less innocent and more adult-like than their white peers, especially in ages 5–14. A snapshot of the data from this report sheds light on the fact that, when compared to white girls of the same age, survey participants perceive that:

- Black girls need less nurturing
- Black girls need less protection
- Black girls need less support
- Black girls need less comfort
- Black girls are more independent
- Black girls know more about adult topics
- Black girls know more about sex

This is all speculative opinion that is in direct conflict with what we know to be true. In recent years, there has been an outcry regarding the need for training and intervention when addressing the implicit bias and over disciplining in schools. Yet, much like the experience of Black womxn, the intersectional needs of Black girls in schools continues to remain unaddressed, leaving them

Disciplinary Action Rates by Race-Ethnicity in Texas, 2018-19

Black students are disciplined at much higher rates than other students.



academic disenfranchisement, and out of school suspension at ratios higher than any other student identity group.

Under the guise of anti-truancy laws, Black girls are mandated to be present in school spaces where they are exposed to constant white gaze, anti-Black lessons and punitive discipline structures, factors that contribute to intense social anxiety disorders and imposter syndrome. These violent psychological attacks are highly celebrated in traditional public-school settings and even more so in charter management organizations. Students are indoctrinated by the same assimilation tactics used in grotesque conversion camps Indigenous children were forced to attend, and much like the zealous, murderous white protestants that performed those genocidal tactics on the first nation people in the Americas, the abusive educators and leaders in current schools receive little to no recourse for the harm they cause.

The National Women’s Law Center presents that across Texas, Black girls are almost seven times more likely to be suspended than white girls for the same infractions, and on many occasions, physically accosted and publicly humiliated. For example, in Dallas, Texas, Black students make up only 20% of the entire school district population but accounted for over 52% of all out of school suspensions in 2019. With the introduction of zero tolerance policies and in school resource officers, Black students have been violated physically, verbally, and emotionally. Some of the cited reasons for expulsion and police detainment for Black girls in schools include but

school by recording a resource officer who is slamming a student on the ground and throwing her across the room, and having a kindergarten temper tantrum about jellybeans.

The Intercultural Development Research Association shared these key findings of their analysis of school discipline data:

- Each year from 2005-06 to 2014-15 in Texas, Black students received in-school suspensions nearly two times the rate they comprised in the total population.
- Economically disadvantaged students comprise 61.2% of the student population but make up 81.5% of out-of-school suspensions and over 76.1% of in-school suspensions and Disciplinary Alternative Education Program actions in 2014-15.
- Students as young as 6-years-old were removed from their kindergarten classes and sent to DAEPs for “discipline” problems. Many of their DAEP teachers are not qualified to teach them, and those who are qualified are unable to coordinate with the students’ “sending” schools.

The school to prison pipeline is a post slavery tactic used to circumvent the 13th Amendment and create a path to enslavement of the descendants of the kidnapped and enslaved Africans, Indigenous People and unassimilated Latinx population. Rooted in the cycle of under-educating, under-preparing and under-serving students who are predominately Black, Indigenous,

Latinx and experiencing poverty. By expelling students, schools are directly reducing access to standard learning, exposure to post-secondary opportunities and impeding on already marginalized students' ability to: graduate on time, access higher education options or livable wages. Racist, money hungry state leaders, local representatives, dysfunctional and ill-equipped teachers, and resource officers in schools have failed Black girls in a multitude of ways and recuse themselves from accountability by villainizing their existence, cultural norms, and vocal tone almost exclusively. Their maltreatment of children is supported by media platforms encouraging societies to deem Black children as inappropriately less feminine, less deserving of respect and ultimately deserving of harsh policies that penalize their presence. Studies show that even at age 16, Black girls are already being paid 21% less than white boys, for the same jobs and duties. The gender and race-based wage gap continues to grow from this point, setting Black girls on a course for underemployment, limited financial resources, preventable medical fatalities, intimate partner violence and mental health deterioration well into their adulthood.

Black girls have been left to fend for themselves as gaps in access grow larger and bootstrap mentality, grit grandeur and the non-inclusive "girl boss" movement gaslights them into a snowball of physical weariness and mental exhaustion. Protecting Black girls must start with prioritizing their ability to experience life as children. Black girls deserve to relish in rest and fullness without toxic, traumatic, state sanctioned abuse. It is on us as a community to combat these oppressive practices and ensure that Black girls can live life loudly and abundantly, for they are our future.

Criminalization of Black Women and the Iniquitous Cash Bail System

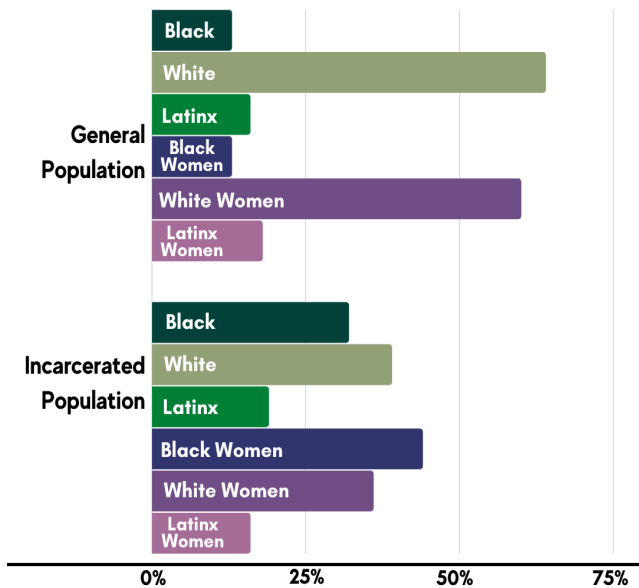
Texas currently boasts the highest incarceration rates within the United States and internationally. Black folk, though estimated to make up only 12-14% of the entire U.S. population, account for 32% of all incarcerated people. Recent data shows that although the rate of incarceration of Black womxn has decreased over the past 20 years, it remains much higher than that of other womxn and includes much more severe sentences in cases of the same or similar infractions by non-Black womxn accused of a crime. Under the current local and regional administration, the collective ability for Black folks in Texas to thrive is threatened by institutions that still view their bodies as currency and a commodity for trade. Black womxn bear the intersectional weight of structural tyranny, systemic abuses of power, and anti-Black racism in every national system, with

corrupt judiciaries claiming their lives and freedom at unprecedented rates. According to The Sentencing Project, Black girls between the ages of 10 -17 are more than three times as likely to be incarcerated than other non-white girls, and Black adult womxn are two times more likely to be imprisoned for the same infractions as white womxn.

Data from a 2014 study shows that annual income of incarcerated people ranges from \$11,820-\$21,975, well below the national poverty line, of which womxn of color make up the largest majority. The Prison Policy Initiative presents that 74% of incarcerated people have never even been convicted of a crime but remain incarcerated due to an inability to pay the excessive costs and fees associated with the cash bail system. As it doesn't take into account a person's financial ability or circumstances, bail bondsman fees, overrun and inadequate court appointed lawyers, and a loss of jobs or secured housing that meets bond expectations can mean months and even years spent behind bars for an individual arrested for a crime that they never committed. This is how Black womxn who experience poverty at higher rates than nearly every other ethnic or gender group- explicitly at a rate of 24.6% vs 10.8% of white womxn, are thrown into the cycle of life altering interruptions that leave them imprisoned hundreds of miles away from their families, buried under mounds of restitution debts, and with only severely marginalized housing and employment options, even after they are acquitted of charges.

Data on womxn in Texas's judicial system shows that 62% of womxn in prison are mothers of minor children and the most common offenses on record for womxn on parole are drug offenses with 42% of womxn on parole for drug possession (24%) or drug delivery (18%). Though non-violent offenses, Texas has introduced and upheld a lifetime ban on any SNAP and TANF benefits for recipients who have previous felony drug charges. For poor mothers, this policy further reduces their financial capacity to care for and support their children, which can put them at risk for losing guardianship of their children for life. Additional studies show that as prison systems were primarily designed for men, the healthcare in these institutions consistently fails to meet womxn's basic physical, mental and reproductive healthcare needs. To date, 70% of womxn in the Texas Department of Criminal Justice have been identified as suffering from a substance abuse disorder, more than half have been sexually assaulted, and 82% of them have been victims of domestic violence. There has been little to no work done to reform this destitute institution, so it remains that for the majority of middle-lower class Black womxn, even the most menial interaction with the criminal justice system can be the determining cause of family disruption, homelessness, excessive violence, joblessness, extreme

Demographic Breakdown of the General Population in Contrast with Prison Populations, by Race: Race + Gender



The incarceration rates of womxn have grown at twice the pace of men in most recent decades, and a quarter of the womxn who are in local county and state jails have yet to have a trial, while over half of them are being detained for an inability to pay bail.

Excerpt: The Sentencing Project

poverty, and death.

The institution of criminal justice and cash bail system are not only problematic, they are but two spokes in the wheel of anti-Blackness that churns Black womxn in and out of a vicious game of catch and release, stealing their sanity. Even when they pose no threat to the public, poor Black womxn accused of petty and non-violent crimes are accosted and confined, while violent, wealthy defendants can buy their way out of jail. This damning cycle of disenfranchisement that intersects color, gender, sexuality, and income is insidious and pervasive. It is no longer enough to just bring light to these injustices; we must take action to directly address and undue this harm.

We, The Afiya Center ask those who are reading this report- those who represent us in culture, community, legislative or local office: What might the impact be if rather than criminalization, the state of Texas instead provided mental health and financial support services for families that reflect a desire to rehabilitate those who may struggle with drug addiction, or provide stability for those who are underemployed and in need of housing, food, and financial support?

Around the country we see the adoption of mutual aid services for Black folx, including The Afiya Center’s own Black Mothers Bail Out Fund where we are providing Black mothers with the resources they need to not only gain their freedom, but to keep it. While we continue our work of abolishing the criminal justice system, we must not forget to care for the folk who are in need right

now. We encourage every person reading this to think not only of how you can be a voice of the voiceless, but how you can also directly contribute - in whatever way you can, to the freedom of Black mothers in Texas and nationwide. They cannot continue to wait





THE AFIYA CENTER PROTEST BAIL FUND

In 2020, Black folk took to the streets to say, “enough is enough and the bullshit stops here”. We collectively made a stance that we would determine and plot the path to our intended destiny and the world watched in feigned awe at the courage of our people who put their lives on the line, in the midst of a global health crisis that disproportionately affect their communities, to fight tyranny right where it stood. Young Black folk across the world committed to this fight, even while knowing they could be snuffed out in the blink of an eye, and no one would even give a damn. Fighting for our lives while losing our lives is not new to Black folk. It has been our experience since being kidnapped and forcibly taken from our families, places of origin, communities, and homes, and enslaved in violently colonized European settlements across the globe.

During this time, thousands of Black folks were arrested for using their voice and berated by the media for “tearing down the city” as if the COVID-19 virus, racist police, and a bigoted governing administration wasn’t sweeping through our communities, killing our families, stealing our jobs, lives, and the ability to protect our families. We, The Afiya Center, refuse to disrespect the purpose and passion that these young folks showed in their decision to stand up for themselves and our collective community. In response to their dedication we created the Protest Bail Fund to support their courageous efforts. Wars are won when brave folk forsake all of the “comforts” that they previously enjoyed to tear out the poison that’s actually killing them and the folk they love. We support the actions of these young people and will forever be here to let them know that we love them back.



WHAT WE KNOW:
**THE CULMINATION OF
INTERSECTING OPPRESSION
IS KILLING BLACK WOMXN.**

Violence against Black womxn and girls in schools, the criminal justice system, and at the hands of racist misogynists is a highly contributing factor to their premature death.

Intersectionality and the Burden of the Black Superwomxn Narrative

The “Black Superwomxn” narrative is a trope used by the anti-ethical, violent perpetrators of debilitating systemic abuse to require more from Black womxn while refusing them the most basic forms of protection, consideration, or respect. While Black womxn are subjected to institutional brutality, gender and race wage gaps, political disenfranchisement, and physical assault, they are simultaneously harrowed as the saviors of the community. The expectation for Black womxn to continue showing up, ready for wars that were never theirs to fight has become a trending topic. Tweets like “Black womxn saved us again” come from tone deaf accounts of the same politicians that voted against critical legislation that would save the lives of Black womxn across the country. In place of reciprocal support, Black womxn are met with mockery and caricatures of their struggles, complete with comparisons to superheroes, while they bleed out on tables in hospitals that don’t take their needs seriously, or on the floors of their own homes, shot to death while playing video games with their nephew on a regular October night.

Throughout this report we have continued to elevate the reality that for Black womxn, the most oppressive force is (and has consistently been since the founding of this nation), anti-Black racism. Oppression is an experience that folk across various backgrounds share. The insecurities caused by this system of capitalism include inadequate medical coverage, technology and food deserts, gender and sexuality bias, and a whole host of other intense and real traumas. For Black womxn, however, being Black and also poor, queer, or differently abled creates a harrowing, compounding intersectional frame of life that results in disproportionate fatalities.

To save the lives of Texas Black womxn, it is imperative that Texas medical practitioners, representatives, judges, law makers, and enforcers be held accountable to transparent and immediate action. Black womxn need more than thoughts and prayers; it is time for the allocation of resources and funding dedicated to creating equitable, comprehensive, culturally competent, and

community relevant mental health resources to address this mountain of pressure that leads to the deterioration of the mental, physical, and financial health of Black womxn.

Upward Mobility and the Impact of White Gaze.

Although Black womxn are one of the fastest growing groups of small business owners and entrepreneurs, they also make up one of the most drastically underinsured and underpaid demographics in the United States, existing within both the gender wage gap and the race wage gap. In 2020, the rise of corporations sharing their data on diversity in the workplace confirmed what many already knew to be true: that even with more Black womxn obtaining higher education degrees and specialized certifications, there are still only a small percentage of Black womxn in high paying roles with comprehensive benefits and senior titles in Fortune 500 companies.

Research on hiring practices across multiple regions suggests that the lack of diversity in high impact leadership roles is not exclusively due to the bias of hiring managers who develop excusatory language in job descriptions. The financial hardship of first-generation college students of color, coupled with the effects of weathering their experiences at predominately white institutions, has an equal, if not even more pervasive hand in limiting the opportunity of choice for Black students. Colleges and universities whose policies don’t address the historic maltreatment of Black students and their intersecting identities (poor, LGBTQIA identifying, differently abled, etc.) or take into account the specific socio-emotional needs of non-white young adults make obtaining degrees and certification abhorrently difficult. The disproportionate numbers of Black students in high paying careers in liberal Arts, STEM and medical fields is a preventable casualty of anti-Blackness in the American education system.

“White gaze” is a term used to describe the mainstream

deferment to whiteness as the default or most relevant perspective in any space, collection of literature, or foundation for policy development. It is the expression of living in society developed to consider first and only the needs, wants and aspirations of white folks. America was founded to establish prosperity exclusively for white males and their heirs. Every policy and law developed has been done so to protect the power of white folk and explicitly prevent the absorption of power or opportunity by Black or Indigenous folks.

The development of American chattel slavery and the laws written to give ownership of Black folks to white slavers into perpetuity is one of the many ways that the American legal system exercised its intention to develop a country that would thrive on white supremacy. The Emancipation Proclamation was effective in breaking the legal bonds of perpetual slavery, but Black Codes and Jim Crow Laws allowed for the continued exploitation and pillaging of Black bodies and families which the American Justice system continues to this day.

Well-funded schools in neighboring districts can enforce zoning protocols, preventing students from lower income neighborhoods with underfunded and dilapidated schools from entering their halls. Well-paying jobs with comprehensive benefits are moved to areas difficult to reach by transient dependent individuals unless they can pay the exaggerated prices of city center apartments, while jobs in lower income neighborhoods where folks experience extreme impacts of environmental poisoning provide no health insurance, benefits packages, or job security

Mental Health and the Historical Experiences of Black Folk in America

Earlier in this report, we shared a working definition of Reproductive Justice as the right to maintain bodily autonomy, have children, not have children, and parent in a safe and sustainable community. Black people across this nation have a historic memory and present reality of violent, unyielding racism. This trauma impacts their ability to rest and contributes to varying degrees of mental anguish, including immense sadness and unsafe thoughts. The National Mental Health Association presents that Black people who experience extreme poverty are twice as likely to report serious psychological distress as those living even two times over the poverty level. Further, it states that Black adults are more likely to have feelings of sadness, hopelessness, and worthlessness than white adults. While Black folk are less likely to die from suicide, Black teenagers are more likely to attempt suicide than white teenagers, 9.8% vs. 6.1% respectively. In short, the overwhelm of racism and

oppression has deteriorated the mental health of Black people in America.

Black womxn are seemingly hyper-invisible when it comes to equity, access, and resources and hyper-visible when it comes to policing, microaggressions and violence. Even whilst drafting this report, there are more cases of Black womxn, Black girls, Black mothers, daughters, aunts, and friends, who have become the unseen and unconsidered victims of workplace violence, in-school violence, redlining, police brutality, anti-blackness, poverty, and disproportionate healthcare. Black womxn remain underrepresented in leadership positions, underpaid for their competence and education levels, and without access to resources that are critical to their survival. We are constantly inundated with oppression and left without the space, safety, or time to process or mourn our losses.

The concept of the strong Black womxn can be almost directly linked to the caricature of the “Welfare Queen.” These images of Black womxn have been paraded around by the media and common folks to attempt to control our desirability, humanity, and worthiness for generations. Black womxn have consistently been seen as inhuman expressions of brazen anger and unkindness, operating on either end of the capitalistic spectrum.


The Welfare Queen as the dependent of the state and the Superwomxn as independently over-masculine. All the while Black womxn are existing in real life, battling systems of oppression that force them into poverty, unsafe motherhood, mountains of educational debt, weathering and the “Black tax” that comes into play the moment folks have more than just enough energy to work and die, more than just enough money to feed and house themselves, or more than just enough energy to decide not to reduce themselves to capitalistic currency and reproductive machines. The moment Black womxn attempt to live in abundance they are villainized by a system that would rather see them die than thrive.

Black womxn have been existing in spaces that do not consider or prioritize their lives for far too long, and this can no longer be an excusable oversight. As Black communities continue to struggle with seeking psychological support, even those who do are still less likely to receive what they need as practitioners who remain mostly white males, have no context of the cultural background and unique experiences that create the diaspora of Black needs on this continent. Even now, Dr. Alang, Ph.D., chair of the Health Justice Collaborative at Lehigh University points out that there is still a lack of informational data or evidence-based mental health treatment options that are applicable to Black folks as the common practice of psychological science has been

to develop, research, and experiment by and for white folks, exclusively. How effective can a solution or practice be if it does not address or relate to the most pressing and diabolical of effects that cause it to ruminate? How can we address Black mental health if doctors and researchers don't truly research and discuss the enormous impact of racism on the bodies and minds of Black folks?

It is beyond imperative that Black womxn have access to high quality mental healthcare and community support- including access to reproductive health services that do not demonize or criticize their decisions not to have children. It is imperative that Black womxn have psychological and physical safety in their homes, their workplaces, and learning environments, and that starts with increasing their access to providers who understand their unique plight and don't add to the stress with financial burden, inaccessible facilities, and classism.

Black mental health practitioners are critical to keeping Black womxn alive. Culturally relevant mental health services are critical to keeping Black womxn alive. The abolition of anti-Black systems that cause mental anguish within the community are critical to keeping Black womxn alive. Black womxn are in dire need and we must fight to keep them alive.



WHAT WE KNOW:
**BLACK WOMXN DESERVE TO
LIVE LIFE, ABUNDANTLY**

The beloved community is a utopian dream for Black womxn, but it doesn't have to remain so. We can change what is happening now, and create safe, flourishing communities. Let us take up this mission with a new regard for what liberation truly means.

Only Accountability and Action will Save the lives of Black Womxn in Texas

With regards to the state of Black Womxn in Texas, based on the information shared throughout this publication, accompanying sources, and in community with the very demographic we represent, The Afya Center offers the State of Texas, its representatives, and community at large, advisement on addressing Health and Human Services, Political Access, Community Enrichment, and Anti Racist Accountability as necessary actions for saving the lives of Black womxn in Texas. The advice we share is not exhaustive, as it is impossible to write in only a few short pages the full scope of abolition, decolonization, and restructuring that would be necessary to rectify the historic exclusion of Black womxn's needs; we simply offer this as a starting point.

We invite readers of this report to commune with us as we lament the lives lost in this battle against racism and reproductive oppression. We expect lawmakers, community organizers and activists to rise up in action to ensure that we no longer see Black womxn and girls lose their lives to systemic violence and prejudice. Only accountability and action will save the lives of Black womxn in Texas. Let today be the day you take on both.

HEALTH AND HUMAN SERVICES

Health is Wealth: Research shows that there are large disparities in the reproductive and general health of Black womxn compared to their white counterparts. For many Black womxn, physical health and financial standing are directly linked as an inability to access high-quality preventative or prescriptive health care. This leads to gaps in employment and high medical debt. It's estimated that access to expanded Medicaid coverage could save the average American nearly \$1000 a year. In short, access to affordable comprehensive healthcare could translate into better health, lower mortality rates, and economic well-being for Black womxn in Texas.

Healthcare is a critical aspect of the human experience. Black communities across the nation with constituents in low-moderate income tax brackets depend on cultural

resources and mutual aid in the form of community fundraising, resource sharing, and storytelling to combat the racist policies that limit their access to livable wages, clean air and water, safe housing, and healthy food.

Grandmothers, midwives, doulas, herbalists, medicine folks and tonic makers have worked to keep their families and neighbors well in the face of expansive Medicaid and Medicare coverage gaps and a workforce that doesn't offer affordable healthcare options to service workers, the majority of whom were essential during the global COVID-19 pandemic. The summer of 2020 brought about a demand for local governing bodies to reduce the funding allocated for the militarization of police forces and the redistribution of those funds to uplift community support services that directly address the needs of folks that have been criminalized and overpoliced. Communities with high percentages of marginalized groups tend to also share disproportionate rates of physical, mental, and financial health crises, all which need to be addressed through non-lethal intervention, counseling, and support services.

The Afya Center agrees that this reallocation of critical funding to support the needs of communities is more effective than simply responding to the symptoms that persist as a result of extreme poverty and state violence. However, the present attributes of Texas's Health and Human Services Department are not at par with the needs of the communities in dire need of its services. With that in mind, we implore our community leaders, and policymakers across Texas to lay the groundwork for the following changes to be made:

1. Deem Senate Bill 8 and House Bill 1515 unconstitutional and immediately dismiss all lawsuits filed against womxn, practitioners, advocates, and supporters of abortion in Texas
2. Develop comprehensive, equity-focused, inclusive sexual education courses that are generationally relevant to the reproductive experiences of human

or all students, along with information on advocacy programs and workshops for parents and families who wish to support their children through their learning.

3. Opt into Medicaid coverage expansion and extend the maternal Medicaid coverage period from 60 days to 365 days, including coverage for culturally relevant support such as doulas and midwives.
4. Create a pathway for affordable advanced certification and degree attainment for healthcare workers of color who provide services in their home communities. Allocate funding and loan forgiveness options for students who take part in medical programs that meet cultural competence accountability standards set by a newly appointed community oversight board.
5. Require bias evaluations and revoke certification for any practitioners whose prescriptive care is clearly impacted by racist medical bias, personal religious or political preferences, etc.
6. Allocate funding for research, program development and comprehensive services such as full cycle family planning and wellness clinics for Black womxn-founded and operated spaces that provide physical, mental, and financial care or safety for Black womxn in urban and rural communities.
7. Provide free, local, easily accessible grief counseling, trauma management and mental health services for all adults and children, regardless of citizenship status or ability to pay.

“At age 25, Americans in the highest income group can expect to live more than six years longer than their lower-income counterparts. Compared with people from families who earn more than \$100,000 a year, those with family incomes below \$35,000 a year are four to five times more likely to report feelings of worthlessness, hopelessness, and sadness all or most of the time.”
- Urban Institute Center of Society and Health

POLITICAL ACCESS

Why Politics Matter: Texas legislation has a long history of developing laws and policies that directly exclude Black womxn’s needs and disregard our experiences. Studies show that when Black womxn gain access to power, money, or opportunities, communities reap the benefit via economic opportunity, an increase in philanthropy, and stronger academic outcomes. Support of Black womxn’s access to the political arena is about more than just positional power, it is the foundation of the development of more just state systems.

The 2020 general election brought about a semi-shift in the political norms of southern counties. Due to the

measures of local Black community organizers and an increase in voter registration amongst historically underrepresented groups, counties that traditionally voted more conservatively were flipped, seeing womxn and people of color elected for the first time in some states. In response to these perceived power shifts, there has been an influx in voter suppression laws introduced across the nation, intended to prevent equitable and unrestricted access for citizens to vote, disenfranchising non-white, non-wealthy, and non-male voters.

Even with the emergence of more diverse voting groups across the state, Black womxn in Texas continue to be underrepresented and excluded from ballots and ballot boxes. During the 2021 legislative session, over 60% of Texas lawmakers were white, and less than 30% of the total count identified as womxn. The lack of intersectionality amongst representatives is not surprising as Texas has historically prioritized white males as power holders. However, as the diversity of the state has grown to nearly 60% persons of color, the cultural, familial, religious, and educational backgrounds that influence policy-relevant beliefs of the old white men appointed as lawmakers pose an extreme detriment to Black womxn and other folks of color, especially those who are also poor, queer, and non-traditional.

Texas State Senate Bill 7 directly impedes voting access by reducing the hours of early voting and outlawing drive-through voting which is especially critical to those who are immunocompromised. By regulating the number of accessible polling places in large urban counties and requiring poll workers to set up voting equipment for stadiums and arenas during a shorter time frame, supporters of this bill are effectively reducing the ability of large counties to provide adequate, accessible polling. Not only do these policies impend on voter accessibility, but misinformation intentionally shared by conservative pundits and white supremacists’ tabloids have also proven to have an immense impact on the political actions of citizens across the country. The January 6 insurrection and riots by supporters of past president Donald Trump is only one example of the extremes to which the white supremacist power hoarders are willing to go to disenfranchise voters.

Black womxn in Texas have dedicated their time and resources in support of the greater needs of society, especially as they relate to education and access for marginalized groups and communities. We are now calling on those same groups and communities to take the actions necessary to ensure our ability to persist in the political arena. We, The Afiya Center, call on the Texas community to:

1. Elevate the voices and platforms of Black womxn who are running for offices or boards in your county,

city, town, or district by inviting them to share information about their political aspirations, and their vision for impact, virtually and in person.

2. Decolonize your mindset around respectability politics and political representation. Encourage and nominate Black womxn who share backgrounds that reflect the communities they will serve in to run for positions that can shift narratives and lead to innovative impact, for and by the people.
3. Develop and support political action committees that hold candidates accountable for addressing systemic environmental and economic racism, including city audits for developing reparation plans, revising city tax allocation structures, and multi-impact structures for the development of historically Black neighborhoods.
4. Contact your local representatives and demand that services like school and road upkeep while blaming their free and fair election is constitutional.
5. Nominate and support Black womxn who come from all walks of life who share backgrounds that reflect the sum of us to platforms that disrupt the norms of anti-Blackness and oppression.

“The fact that all but one President and Vice President in the history of the United States has been a white man would be completely unbelievable if the American psyche didn’t see leadership as equating to that one demographic.”

- Andre M. Perry

COMMUNITY ENRICHMENT

Rethinking Environmental Justice: *Historically, public conversations about community development and environmentalism have prioritized white face commentary, completely ignoring the voices of Black parents and activists fighting to address the underdeveloped city transit systems, unkempt parks, lack of light sources, disproportionate flooding, poisoned air, water, and food wreaking havoc on the health and safety of their children and community. Bodily autonomy is stolen from poor Black womxn in urban and rural Texas by officials who refuse to hold city departments accountable for the critical services they are responsible for providing and continue to allow developers to create toxic factories and landfills in close proximity of predominantly Black neighborhoods. When we consider the definition of Reproductive Justice, it is clear that environmental oppression is a key factor in its perpetuation.*

During reconstruction, Black communities in Texas were safe havens for recently freed folks and their families, providing shelter, nourishment, education, and employment. The establishment of Black townships and the wealth that they were able to amass through interwoven systems of a sustainable, beloved community

with low income and high populations as conduits for failing infrastructure and under-resourced schools.

The American relationship with historically Black townships and neighborhoods is riddled with stories of state-sanctioned desolation and destruction. The “Undesign the Redline” project in Dallas was presented by the Office of Racial Equity in 2019 and uncovered the highly documented slum creations, redlining, gentrification and economic gaslighting processes led by federal housing authorities, banks and city planning officials. These plans ravaged the Black townships of Joppa, Queens City, Deep Ellum, Fair Park, and the Freedman’s Cemetery. Yet there has been no effort on the cities part to rectify the harm done. Streets and parks of the Southern Sector are left unattended by city services, schools remain under-resourced, forcing students into buildings with dated textbooks, poor plumbing, ill-prepared teachers and violent resource officers, and grocery stores- which remain far and few between, are understocked and lack nutritionally balanced community-relevant foods. The limited businesses that do operate in predominantly Black communities often ostracize and villainize those in proximity, choosing to place metal bars or locks over items considered the most basic of needs, absolving developers or business owners of their responsibility to address why so many of the folk in these communities remain in need of them.

This story is not exclusive to Dallas, nor the state of Texas. Many of the remaining historically Black communities- both rural and urban, have become open prisons, preventing the majority of those who are born into them from accessing the resources they need. For the few that can access opportunity, there comes an immediate expectation of detachment from their home and community norms as a survival technique for existing semi-safely in predominately white spaces. This cannot continue to be the course of life for Black folks. It is time for accountability and restitution. The Commission to Study and Develop Reparation Proposals for African Americans Act, in 1989 has yet to act on any of the documented research and plans proposed to address the immense and multi-generational theft experienced by Black Americans. In 2014, Ta-Nehisi Coates published “The Case for Reparations” in the Atlantic, focusing specifically on the reparations owed to Black homeowners in Chicago, based on theft of money and property by the federal government and local governing bodies. His research estimates that between \$34 billion is owed to Black Chicago families and sites the reconciliation and reparations processes integrated by Germany post-Holocaust as viable proof of feasibility. During the 2020 election, Democratic nominees made empty promises to push forward this restitution of this centuries-old debt, yet there has been no action.

The Afiya Center seeks to build community with organizations and individuals who believe in creating a hyper-local strategy to decrease the harm inflicted on our community and move toward restitution from the state. We believe that through collective action, we can:

1. Work as a community to develop and uplift alternative forms of safety in Black communities while pressuring the state and local governing bodies to reallocate funding to establish and support autonomous community-founded and operated enrichment programs and systems.
2. Review local opportunity zone fund initiatives and selections for equity, as it was written in the initial proposal, and restructure funder prioritization to reflect the demographics and backgrounds of the communities that already exist in the spaces, with special consideration for communities that have been displaced through gentrification, redlining, and gerrymandering.
3. Pursue official research of economic and environmental oppression of residents of historically Black rural and urban communities to develop a 10 year plan for reparations that includes business development, community exclusive contracting, the decomposition of housing projects as a component of reformed homestead act including land quality surveyance, grants for agricultural development, green development credits, etc.
4. Demand accountability for city services that don't provide equitable support to low-income communities as written in their official city establishment charters.

“It’s comfortable for people to separate them [social justice and environmentalism] because remember that the environmental movement, the conservation movement, a lot of those institutions were built by people who cared about conservation, who cared about wildlife, who cared about trees and open space and wanted those privileges while also living in the city, but didn’t care about Black people. There is a long history of racism in those movements.”

-Elizabeth Yiempiere



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